# Agreement and Activitie eport

#### nent of Labor U.S. Depa

Office of Labor-Management Standards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may

OMB No. 1214-0001

result in criminal prosecution,	fines and civil pen	aities as p	provided by 2	9 U.S.C.	439, 440.	RE	VISED		02/2	9/93
Required of Persons, including Lat Under Section 203(b) of the Labor	oor Relations Consulta	ints and Oth	ner Individuals	and Orga	anizations,	RDA).	File No.	c.	464	
A. Person Filing										
<ol> <li>Name and maling address (included)</li> </ol>	ude ZIP code):		2. Any other a	address	where records	necess	ary to verif	y this	report are	e kep
Labor Information Service	es, Inc.				221					
PO Box 6063					None					
Malibu, CA 90264										
3. Date fiscal year ends:	4. Type of person:									
12/31/2000	a. 🗆 Individus	d b. □	Partnership	c. 🖾	Corporation	1 d. □	Other (S	pedify	1):	
B. Nature of Agreement or An	-									
5. Full name and address of emp	loyer with whom mad	le (include	ZIP code):	6. Dat	te entered into		15/00			
Santa Barbara Cottage Hos	spital			7 1				- da.		
Pueble at Bath Steeet				/. NE	ames of persor		•			
8. Check the appropriate box to	indicate whether an o	hiect of the	activities unde	rtaken			n Crozier			
a. XX To persuade employee	es to exercise or not to	exercise,	or persuade en	ployees	s as to the mar	nner or e	exercising,	the rig	ht to org	anize
collectively through re	presentatives of their	own choos	ing.							
<ul> <li>To supply and employ</li> </ul>										
dispute involving such criminal or civil judicia		ormation fo	r use solely in	conjunct	ion with an ad	ministra	tive or arbi	tral pro	oceeding	or a
	-	of instruct	iana).							
<ol><li>Terms and conditions (Explain</li></ol>	illi detali, see Fart b-s	or manact	10115).							
Revised to increase	maximum hours to	550. A	lso add addi	tional	persons tha	t perf	ormed the	work	<b>:</b>	
						•				
C. Specific Activities to be P	erformed									
10. For each activity, separately	list in detail the inform	nation requi	ired (See Part C	-10 of in	structions):					
a blance of activities										
a. Nature of activity:										
<ul> <li>b. Peroid during which perf</li> </ul>	ormed:	c. Extent p	performed:							
d. Nam, es and addresses of	of persons through wh	om perform	ned:			[				-
						llo	1 5 6	5 1	W	0
Paul Johnson and Larry Wo			>			110	1	-		7111
Labor Information Serv						In	Harr	0.0	0000	Ш
11. Identify (a) Subject employee	s, groups of employe	es, and (b)	labor organiza	tions:		JUL	11 NOA	28	2000	10
								SDOL/E		-4
							OLM	S/DOE/	/SRD	

D. Verfication and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

Signed:		1		Signed:				
	me on	W	President			Treasurer		
(If other title, cross out and write in correct title above.)				(If other title, cross out and write in correct title above.)				
City	State		Date	City	State	Date		
at:	Malibu	CA	on: 10/30/00	at:		on:		
Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions								

searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Labor Management Standards, Department of Labor, Room N5625, 200 Constitution Avenue, N.W., Wash., D.C. 20210; and to the Office of Management and Budget, Paperwork Reduction Project (1214-0001), Wash., D.C. 20503.

## Agreement and Activities aport

Malibu

#### ent of Labor U.S. Depa

Office of Labor-Management Standards



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REVISED

OMB No. 1214-0001 02/29/93

Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations, Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA).						File No	<b>c.</b> 464
A. Person Filing							
1. Name and maling address (in	2.	Any other ad	dress w	here records ne	cessary to ve	rify this report are kep	
Labor Information Servic							
PO Box 6063			NONE				
Malibu, CA 90264							
3. Date fiscal year ends:	4. Type of person	:					
12/31/00	a. 🗆 Individ	ual b. 🗆 Par	rtnership	c. 🖾	Corporation	d.   Other (	(Spedify):
B. Nature of Agreement or	Arrangement						
5. Full name and address of en	nployer with whom m	ade (include ZIP	code):	6. Date	entered into:		
CPL Subacute, LLC (Cedar	Lane Nursing Hom	e)			3/	20/00	
955 South Main Street				7. Nar	nes of persons t	hrough whom	made:
Middletown, CT 06457				Mar	k Finkelstei	n	
b.   To supply and emplo	representatives of the over with information of employer, except in cial proceeding.  ain in detail; see Part 8 mum hours to 425	ir own choosing. concerning the ac nformation for us 3-9 of instructions and add addit	ctivities of eme solely in co	nployees	s or a labor orga on with an admin	anization in co	nnection with a labor bitral proceeding or a
b. Peroid during which pe	erformed:	c. Extent perfo	rmed:				
d. Nam, es and addresses	s of persons through w	rhom performed:	Addi	tional	names added	:	
Russ Melita Brent	Yessin				1	1 6 6 6	0.00.0
Dee Screws	All with	Labor Informa	ation Servi	ices, I	nc.	EGE	U V 15 [2]
Olga Tapia		(above addre	ess)		110	{	7/11/1
11. Identify (a) Subject employ	ees, groups of employ	rees, and (b) lab	or organizatio	ons:	1/1	II MOV o	0.0000
						USDO	8 2000 U
						OLMS/D	OE/SRD
D. Verfication and Signature that all information in this report to the best of his knowledge and the best of his knowledge are	t, including all attachr	nents incorporate	d therein or r				
Signed:		Preside					Treasure
(If other title, cross out and write			(If other t		ess out and write		
City	State	Date		City		State	Date

10/30/00

on:

at:

CA

on:

### U.S. Department of Labor of inaltouniar

Office of Labor nagement Standards

Section 1

This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

OMB No. 1214-0001 02/29/93

Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations, Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA).

File No. C. 464

A. Person Filing				, ,		
Name and maling address (include)	de ZIP code):	2. /	ny other add	dress where records	necessary to verif	y this report are kept
Labor Information Services			•			
P 0 Box 6063				NONE		
Malibu, CA 90264						
3. Date fiscal year ends:	4. Type of person:					
12/31/2000	a. 🗆 Individu		nership o	Corporation	d. 🗆 Other (S	pedify):
B. Nature of Agreement or Arra	angement					
5. Full name and address of emple		de (include ZIP d	ode):	6. Date entered into:		
Brandywine Nursing Home		•		6/7/2000		
620 Sleepy Hollow Road				7. Names of persons	through whom m	ade:
Briar Cliff Manor, NY 105	510			Paul	Roth	
8. Check the appropriate box to in	ndicate whether an			ken, is directly or inc	irectly:	the sight to essecion
<ul> <li>a. M To persuade employees collectively through rep</li> </ul>			rsuade empi	oyees as to the mann	er or exercising,	the right to organize
b.   To supply and employe			tivities of em	ployees or a labor or	ganization in conf	ection with a labor
dispute involving such						
criminal or civil judicial	proceeding.			,		
9. Terms and conditions (Explain	in detail; see Part B	-9 of instructions	:			
Starting 6/7/2000 thr	ough 6/29/2000	, our firm wi	1 be condu	ucting meetings w	ith employees	from the voting
unit to discuss the realit	ies of signing	authorization	cards and	voting in the up	coming electio	n. A maximum of
400 hours will be allo	cated to this w	ork. Billing	of time ar	nd expenses will	be done month1	y. There is
no written agreement as to	a maximum bill	able amount.				
C. Specific Activities to be Period 10. For each activity, separately li						
they wish to be represente	d for the purpo					
<ul> <li>b. Peroid during which perfo</li> </ul>	rmed:	c. Extent perfo	med: On-go	oing meetings, up	to 24 hours b	efore the election
6/7/2000 through e	lection date	will be per	ormed. Th	delines, review	p or individua	1 meetings to
d. Nam, es and addresses of	persons through w	hom performed:				
Russ Melita	Rosalyn War			Γ	T P O P	D 00 D pm
Ray Perez		L	bor Inform	nation Services,	mc. E G E	U W - 15 In )
Annette Raggette			above addr		107	
11. Identify (a) Subject employees	s, groups of employ	ees, and (b) labo	r organizatio	ns:	MOV O	0 0000
All voting employees	in bargaining	unit.		1	UU NOV 2	8 2000
, , , , , , , , , , , , , , , , , , , ,	,					
					USDOL OLMS/DO	
					WHILE IN THE PROPERTY OF THE PARTY OF THE PA	
D. Verfication and Signature. that all information in this report, in						
to the best of his knowledge and b			a triesens or it	alerted to itt this repo	it, nas Deen exam	illed by fill and is,
Signed:	)		Signed:			
Tan's		Preside	1 -			Treasurer
(If other title, cross out and write-in	correct title above			tle, cross out and wri	ite in correct title	
	State	Date		City	State	Date
at: Malibu	CA	on: 6/30/00	at:			on:
Public reporting burden for this collection existing data sources, gether	tion of information is	s estimated to ave	nd completing	and reviewing the soil	action of informatio	iewing instructions
regarding this burden estimate or any Management Standards, Department of Paperwork Reduction Project (1214-00)	Labor, Room N5625,	200 Constitution A	ation, includin	a successions for reduc	ing this burden to	the Office of Labor